Fill in this information t	o identify your case:	
Debtor 1 DeAnndra Lechel Burton		
Debtor 2 (Spouse, if filing)		
United States Bankrup	tcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI	
Case number 22-00255		Check if this is:
(If known)		☐ An amended filing
Official Form	<u>106I</u>	A supplement showing postpetition chapter 13 income as of the following date: 6/01/2025 MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	F	■ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Teacher	
	Include part-time, seasonal, or self-employed work.	Employer's name	East Feliciana Parish School Board	
	Occupation may include student or homemaker, if it applies.	Employer's address	P.O. Box 397 Clinton, LA 70722	
		How long employed the	here? 8 years	_

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 4,485.54 \$ N/A

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ N/A

. Calculate gross Income. Add line 2 + line 3. 4. \$ 4,485.54 \$ N/A

Official Form 106l Schedule I: Your Income page 1

Debt	or 1	DeAnndra Lechel Burton	_	(Case	number (if known)	2	2-00255	
					For	Debtor 1		For Debtor 2 or	
	Conv	line 4 here	4.		\$	4,485.54	_	non-filing spouse N/A	
	ООРУ	/ line 4 nere	٠.		Ψ_	4,403.34		ΨΙ	
5.	List a	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	89.71		\$ N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$	0.00		\$N/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$	20.00		\$N/A	
	5d.	Required repayments of retirement fund loans	5d.		\$	0.00		\$N/A	
	5e.	Insurance	5e.		\$	424.78		\$ N/A	
	5f.	Domestic support obligations	5f.		\$	0.00		\$N/A	
	5g.	Union dues	5g.		\$_	0.00		\$ N/A	
	5h.	Other deductions. Specify: Garnishment Processing Fee	5h.	+	\$	3.00		\$N/A	
		LAE Member Fee	_		\$_	45.34		\$ N/A	
		Federation of Teachers	_		\$_	14.26		\$ <u>N/A</u>	
		Disability			\$	38.80		\$ <u>N/A</u>	
		Critical Illness	_		\$_	9.36		\$N/A	
		Life	_		\$_	0.30		\$ N/A	
•		TRS Regular SHeltered (State Retirement)			\$	333.28		\$ N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	978.83		\$ <u>N/A</u>	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,506.71		\$N/A	
9.	8a. 8b. 8c. 8d. 8e. 8f.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	8c. 8d. 8e.		_	0.00 0.00 0.00 0.00 0.00 0.00 0.00	: : :	\$ N/A	
10.	Calcu	ulate monthly income. Add line 7 + line 9.	10. \$	 \$;	3,506.71 + \$	L	N/A = \$	3,506.71
	Add t	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L						
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not ify:	deper			•	•		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines							3,506.71
13.	Do yo	ou expect an increase or decrease within the year after you file this form No.	?						y income
		Yes. Explain:							

Fill	in this information to identify your case:				
Deb	otor 1 DeAnndra Lechel Burton		Check	c if this is:	
Dob	otor 2		_	An amended filing	da a a a sta stitica ab auton
	ouse, if filing)			A supplement snow 3 expenses as of t	ving postpetition chapter the following date:
11-4	and Otatas Deally water Occupion to a COLITY IEDN DISTRICT OF MISSI	CCIDDI		6/01/2025 MM / DD / YYYY	
Unit	ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSI	<u> </u>	ľ	MIM / DD / YYYY	
	e number 22-00255 nown)				
(11 K	itowii)				
0	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this finber (if known). Answer every question.				
Par	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate House	hold of Debto	or 2.	
2.	Do you have dependents? ☐ No	,			
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		4	■ Yes
					□ No
		Son			■ Yes □ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
Par	t 2: Estimate Your Ongoing Monthly Expenses				
exp	imate your expenses as of your bankruptcy filing date unless your some as of a date after the bankruptcy is filed. If this is a suppolicable date.				
Inc	lude expenses paid for with non-cash government assistance if	you know			
the	value of such assistance and have included it on <i>Schedule I:</i> Y ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In	nclude first mortgage			0.00
	payments and any rent for the ground or lot.		4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$ 4c. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses4d. Homeowner's association or condominium dues		4c. \$		0.00
5.	Additional mortgage payments for your residence, such as hor	me equity loans	5. \$		0.00

Deb	ebtor 1 DeAnndra Lechel Burton	Case nu	mber (if known)	22-00255
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a	. \$	163.00
	6b. Water, sewer, garbage collection	66	. \$	40.00
	6c. Telephone, cell phone, Internet, satellite, and cable s	ervices 60	:. \$	80.00
	6d. Other. Specify:		l. \$	0.00
7.	Food and housekeeping supplies	7	. \$	828.00
8.	Childcare and children's education costs		. \$	0.00
9.	Clothing, laundry, and dry cleaning	g	· -	125.00
	Personal care products and services		. \$	50.00
	Medical and dental expenses		. \$	55.00
12.	 Transportation. Include gas, maintenance, bus or train far Do not include car payments. 		. \$	250.00
13.	Entertainment, clubs, recreation, newspapers, magazing	es, and books	5. \$	69.00
14.	. Charitable contributions and religious donations	14	. \$	0.00
15.	. Insurance.		-	
	Do not include insurance deducted from your pay or include		•	
	15a. Life insurance		. \$	0.00
	15b. Health insurance		. \$	0.00
	15c. Vehicle insurance		. \$	214.00
	15d. Other insurance. Specify:		l. \$	0.00
	 Taxes. Do not include taxes deducted from your pay or inc Specify: 		i. \$	0.00
17.	Installment or lease payments:		•	
	17a. Car payments for Vehicle 1		. \$	0.00
	17b. Car payments for Vehicle 2		. \$	0.00
	17c. Other. Specify: Estimated Car Payment		:. \$	550.00
4.0	17d. Other. Specify:		l. \$	0.00
18.	 Your payments of alimony, maintenance, and support to deducted from your pay on line 5, Schedule I, Your Inc. 		. \$	0.00
19.	Other payments you make to support others who do no		\$	0.00
	Specify:	19		
20.	Other real property expenses not included in lines 4 or			
	20a. Mortgages on other property		. \$	0.00
	20b. Real estate taxes		. \$	0.00
	20c. Property, homeowner's, or renter's insurance		. \$	0.00
	20d. Maintenance, repair, and upkeep expenses		l. \$	0.00
٠.	20e. Homeowner's association or condominium dues		. \$	0.00
21.	. Other: Specify: Pet Care	21	. +\$	40.00
22.	. Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	2,464.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, f	rom Official Form 106J-2	\$,
	22c. Add line 22a and 22b. The result is your monthly expe	enses.	\$	2,464.00
23	Calculate your monthly net income.			
20.	23a. Copy line 12 (your combined monthly income) from §	Schedule I. 23a	. \$	3,506.71
	23b. Copy your monthly expenses from line 22c above.			2,464.00
	200. Copy your monany expenses from the 220 above.	200		2,404.00
	23c. Subtract your monthly expenses from your monthly in The result is your <i>monthly net income</i> .	ncome.	s. \$	1,042.71
24.	 Do you expect an increase or decrease in your expense For example, do you expect to finish paying for your car loan within modification to the terms of your mortgage? No. Yes. 			ease or decrease because of a
	— 165. — — — — — — — — — — — — — — — — — — —			

Fill in this i	nformation to identify your	case:			
Debtor 1	DeAnndra Leche	Burton			
	First Name	Middle Name	Last Name		
Debtor 2	i) First Name	Middle Mana	Last Name		
(Spouse if, filing)) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	SOUTHERN DISTRIC	T OF MISSISSIPPI		
Case number	er 22-00255				
(if known)				I	☐ Check if this is an amended filing
o					
	orm 106Dec				
Decla	ration About a	ın Individua	l Debtor's Sc	chedules	12/15
f two marrie	ed people are filing togethe	r, both are equally respo	onsible for supplying cor	rect information.	
You must fil	e this form whenever you fi	le bankruptcy schedule	s or amended schedules	. Making a false statement, o	concealing property, or
obtaining m	oney or property by fraud in	n connection with a ban		in fines up to \$250,000, or in	
years, or bo	th. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
	1				
	Sign Below				
Did yo	u pay or agree to pay some	one who is NOT an atto	rney to help you fill out b	pankruptcy forms?	
■ N	0				
ПУ	es. Name of person			Attach Rankruntcy	Petition Preparer's Notice,
·					gnature (Official Form 119)
	penalty of perjury, I declare by are true and correct.	that I have read the sun	nmary and schedules file	ed with this declaration and	
X /s/	DeAnndra Lechel Burto	n	X		
	Anndra Lechel Burton	••	Signature of	Debtor 2	
Sig	nature of Debtor 1		-		
Do	to June 10, 2025		Data		